

B6F (Official Form 6F) (12/07)

In re **Alvion Properties, Inc.**Case No. **15-40462**

Debtor

## AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.			<b>Legal fees</b>				
<b>Day and Blair PC</b> <b>5300 Maryland Way Ste 300</b> <b>Brentwood, TN 37020</b>		-					<b>8,814.17</b>
Account No.							
Account No.							
Account No.							
Subtotal (Total of this page)							<b>8,814.17</b>
Total (Report on Summary of Schedules)							<b>8,814.17</b>

0 continuation sheets attached

**United States Bankruptcy Court  
Southern District of Illinois**

In re Alvion Properties, Inc.

Debtor(s)

Case No. 15-40462

Chapter 11

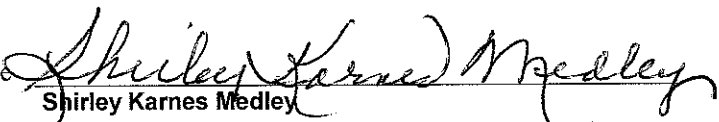
**AMENDED  
DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing document(s), consisting of 1 page(s), and that they are true and correct to the best of my knowledge, information, and belief.

Date 08/25/15

Signature

  
Shirley Karnes Medley  
President

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court**  
**Southern District of Illinois**

In re **Alvion Properties, Inc.**

Debtor(s)

Case No. **15-40462**


Chapter **11**

VERIFICATION OF CREDITOR MATRIX - AMENDED

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge and that it corresponds to the creditors listed in our schedules.

Date:

08/25/15

  
**Shirley Karnes Medley/President**  
Signer/Title

CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the foregoing instrument was served upon:

Mark Skaggs, U.S. Trustees Office  
401 Main Street, Suite 1100  
Peoria, IL 61602

Ziemer, Stayman, Weitzel & Shoulders, LLP  
Attn: Nick j. Cirignano  
P.O. Box 916  
Evansville, IN 47706-0916

Joel A. Kunin, Esq.  
The Kunin Law Offices, LLC  
1606 Eastport Plaza Drive, Ste. 110  
Collinsville, IL 62234-6134

The Coffman Law Firm  
Attn: Richard L. Coffman  
505 Orleans, Suite 505  
Beaumont, TX 77701

Day and Blair PC  
5300 Maryland Way Ste 300  
Brentwood, TN 37020

either electronically or by enclosing in an envelope with postage fully prepaid and by depositing said envelope in a U. S. Post Office mail box in Mt. Vernon, Illinois, on the 28th day of August, 2015. The above is true and correct to the best of the undersigned's knowledge.

/s/ Nancy E Antonik  
Nancy E Antonik